

DEC 1 2002

TRANSMITTAL FORM

Application Serial Number	08/726.093
Filing Date	October 4, 1996
First Named Inventor	Fuchs
Group Art Unit	1631
Examiner Name	Marschel, A.
Attorney Docket No	SYP-116
Patent No.	Not applicable
Issue Date	Not applicable

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ENCLOSURES (check all that apply)

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| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form
<input type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
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<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]
<input checked="" type="checkbox"/> Petition for Extension of Time
<input type="checkbox"/> Information Disclosure Statement
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<input type="checkbox"/> Copies of IDS Citations
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<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)
<input type="checkbox"/> Formal Drawing(s)
<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal
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<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application
<input type="checkbox"/> Small Entity Statement
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<input checked="" type="checkbox"/> Return Receipt Postcard
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CORRESPONDENCE ADDRESS

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Respectfully submitted,

Michael H. Brodowski
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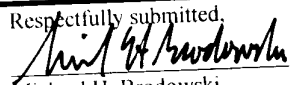
Date: December 31, 2002
Reg. No. 41.640
Tel. No.: (617) 248-7012
Fax No.: (617) 248-7100

FEE TRANSMITTAL
FY 2003

Complete if Known

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METHOD OF PAYMENT		FEE CALCULATION (continued)			
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES			
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input type="checkbox"/> Overpayment Credit.		Large Entity Fee (\$) 130 50 130 2,520 110 400 920 1440 1960 320 320 280 130 180 740 740 100	Small Entity Fee (\$) 65 25 130 2,520 55 200 460 720 980 160 160 140 130 180 370 370 100	Fee Description Surcharge - late filing fee or oath Surcharge - late provisional filing fee or cover sheet Non-English specification Request for ex parte reexamination Extension for reply within first month Extension for reply within second month Extension for reply within third month Extension for reply within fourth month Extension for reply within fifth month Notice of Appeal Filing a brief in support of an appeal Request for oral hearing Petitions to the Commissioner Submission of Information Disclosure Statement Filing a submission after final rejection (37 CFR 1.129(a)) For each additional invention to be examined (37 CFR 1.129(b)) Certificate of Correction for applicant's error	Fee Paid 920.00
3. <input type="checkbox"/> Applicant claims small entity status.		Other fee (Specify) _____ Other fee (Specify) _____			
FEE CALCULATION		SUBTOTAL (3) (\$ 920.00)			
1. FILING FEE		SUBTOTAL (1) 0.00			
Large Entity Fee (\$) 740 330 160	Fee Description Utility filing fee Design filing fee Provisional filing fee	Fee Paid		SUBTOTAL (2) 0.00	
Total Claims - 20 = x \$ 18.00 = Independent Claims - 3 = x \$ 84.00 = <input type="checkbox"/> Multiple Dependent Claim(s), if any \$280.00 =	Number Filed 20 3	Number Extra 0 0	Rate \$ 18.00 \$ 84.00	Amount 0.00 0.00 0.00	TOTAL (\$ 920.00)
2. AMENDMENT CLAIM FEES		TOTAL (\$ 920.00)			
Claims Remaining After Amend. Total 11 Indep. 1	Highest No. Previously Paid For - 75 = - 10 =	Present Extra 0 0	Rate x \$ 18.00 = x \$ 84.00 = + \$280.00 =	Fee Paid 0.00 0.00 0.00	SUBTOTAL (2) (\$ 0.00)
<input type="checkbox"/> First Presentation of Multiple Dep. Claim		TOTAL (\$ 920.00)			
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK			
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Date: December 31, 2002 Reg. No.: 41,640 Tel. No.: (617) 248-7012 Fax No.: (617) 248-7100 Respectfully submitted,  Michael H. Brodowski Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110			